

# CHILD & FAMILY PEI PROGRAMS

## SYSTEMWIDE SUMMARY

COUNTY OF SAN DIEGO HEALTH & HUMAN SERVICES AGENCY  
BEHAVIORAL HEALTH SERVICES  
PREVENTION & EARLY INTERVENTION PROGRAMS

FISCAL YEAR 2019–20 ANNUAL REPORT



The Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) funding gives counties a unique opportunity to implement programs to help prevent the onset of mental illness or to provide early intervention to decrease severity. The County of San Diego has funded contractors to provide PEI programs for youth and their families. The focus of these programs varies widely, from teaching caregivers how to cope with behavior problems in young children to preventing youth suicide. Each contractor collects information on the demographics of their participants and their satisfaction with the services provided for both active and outreach participants. Active participants include people who are enrolled in a PEI program and/or are receiving services at a PEI program. Outreach participants include people who are touched by a PEI program via outreach efforts, including but not limited to: presentations, community events, and fairs.

### DATA: Child and Adolescent PEI Programs

REPORT PERIOD: 7/1/2019-6/30/2020

NUMBER OF PARTICIPANTS WITH DATA IN FY 2019-20: 25,422 (Unduplicated) \*\*†

\*Data for all students participating in the HERE Now Suicide Prevention program were calculated from a representative sample of students who provided demographic and satisfaction information.

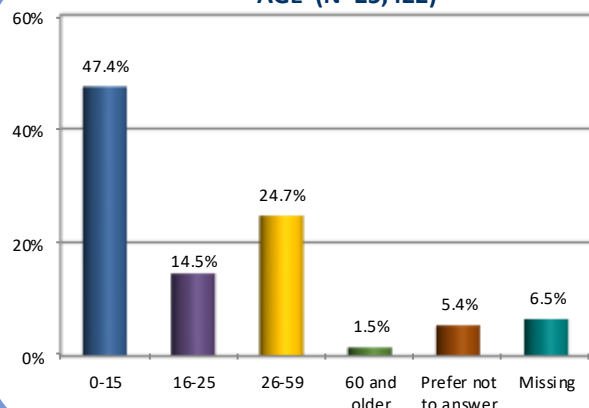
†Data collection requirements vary by program type. Not all programs are required to collect data for every indicator, which accounts for the two different denominators referenced in this report: (N=25,422 vs. N=11,930)

\*\*All known duplicates are excluded from this count; however, unduplicated status cannot be verified among programs that do not issue client identification numbers.



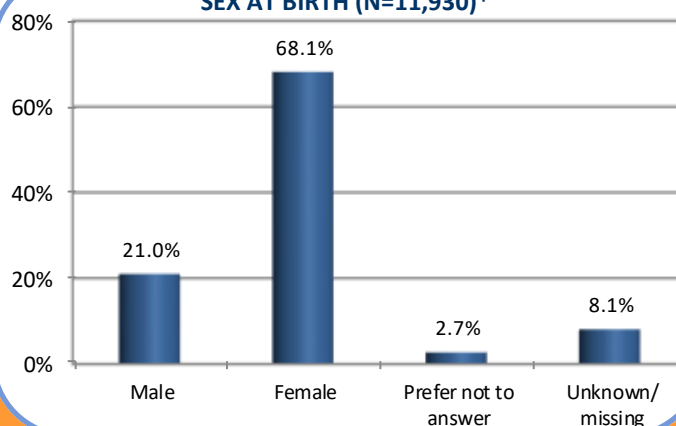
### PARTICIPANT SYSTEMWIDE DEMOGRAPHICS

#### AGE (N=25,422)



The majority (47%) of participants were 15 or younger. Some participants were older than 18 because several children's PEI programs target caregivers, community members and Transition Age Youth (TAY).

#### SEX AT BIRTH (N=11,930)\*



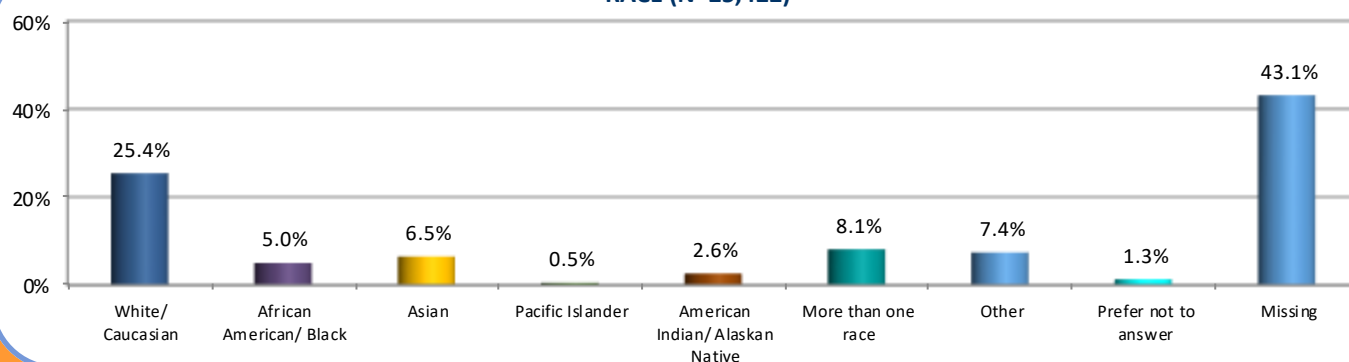
Sixty-eight percent of participants identified their sex at birth as female.

\*Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=11,930 vs N=25,422).

## PARTICIPANT SYSTEMWIDE DEMOGRAPHICS– CONTINUED

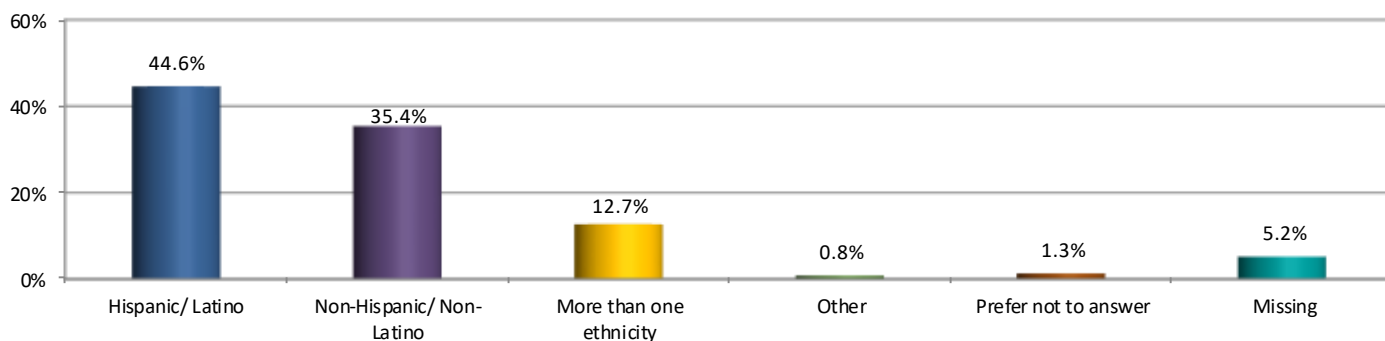
### RACE AND ETHNICITY

**RACE (N=25,422)**



Twenty-five percent of participants identified their racial background as White/Caucasian. Eight percent of participants identified as having more than one racial background. The unknown/missing category includes clients who only endorsed being Hispanic/Latino and did not indicate a racial category.

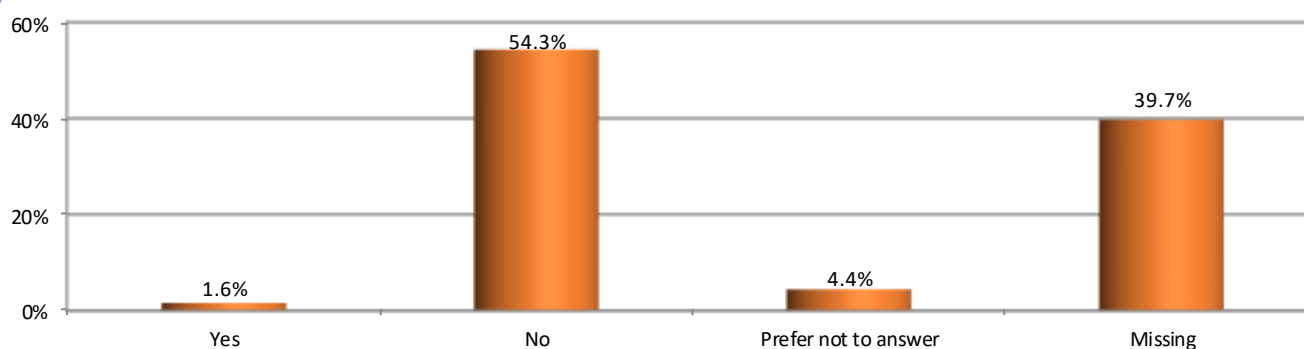
**ETHNICITY (N=25,422)**



Thirty-five percent of participants identified their ethnic background as non-Hispanic/non-Latino, and forty-five percent of participants identified their ethnic background as Hispanic/Latino.

### MILITARY SERVICE

**VETERAN STATUS (N=11,930)\***

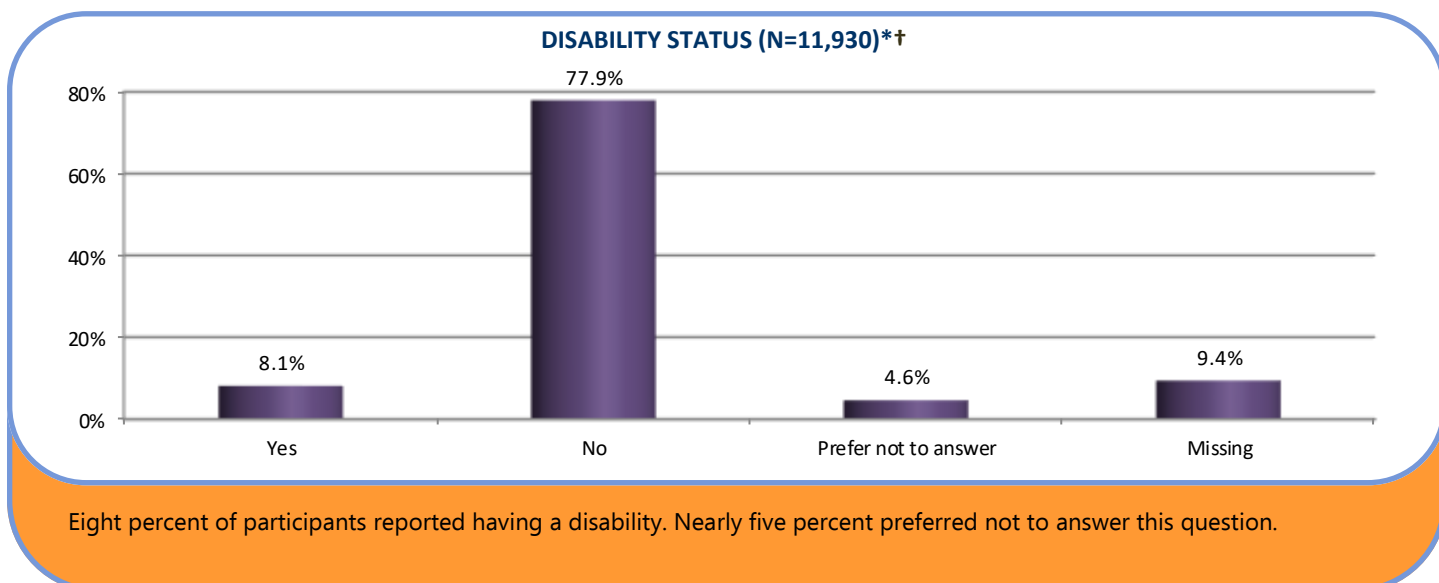


Information on veteran status indicated that nearly two percent of participants had served in the military. Additionally, just over one percent of participants reported that they are currently serving in the military.

*\*Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=11,930 vs N=25,422).*

## PARTICIPANT SYSTEMWIDE DEMOGRAPHICS– CONTINUED

### DISABILITY STATUS



\*A disability is defined as a physical or mental impairment or medical condition lasting at least six months that substantially limits a major life activity, which is not the result of a serious mental illness.

†Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=11,930 vs N=25,422).

DISABILITIES (N=11,930)**	Count	%
Difficulty seeing	322	2.7
Difficulty hearing or having speech understood	149	1.2
Mental disability not including mental illness	327	2.7
Learning disability	161	1.3
Developmental disability	59	0.5
Physical/mobility disability	139	1.2
Chronic health condition/chronic pain	154	1.3
Dementia	27	0.2
Other communication disability	78	0.7
Other mental disability not related to mental illness	80	0.7
Other disability	172	1.4
No disability	9,290	77.9
Prefer not to answer	553	4.6
Unknown/Missing	1,121	9.4

Seventy-eight percent of participants indicated no disability. Nearly three percent of participants indicated having difficulty seeing, and three percent had a mental disability not including mental illness.

\*The sum of the percentages may exceed 100% because participants can select more than one type of disability.

†A disability is defined as a physical or mental impairment or medical condition lasting at least six months that substantially limits a major life activity, which is not the result of a serious mental illness.

‡Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=11,930 vs N=25,422).

## PARTICIPANT SYSTEMWIDE DEMOGRAPHICS– CONTINUED

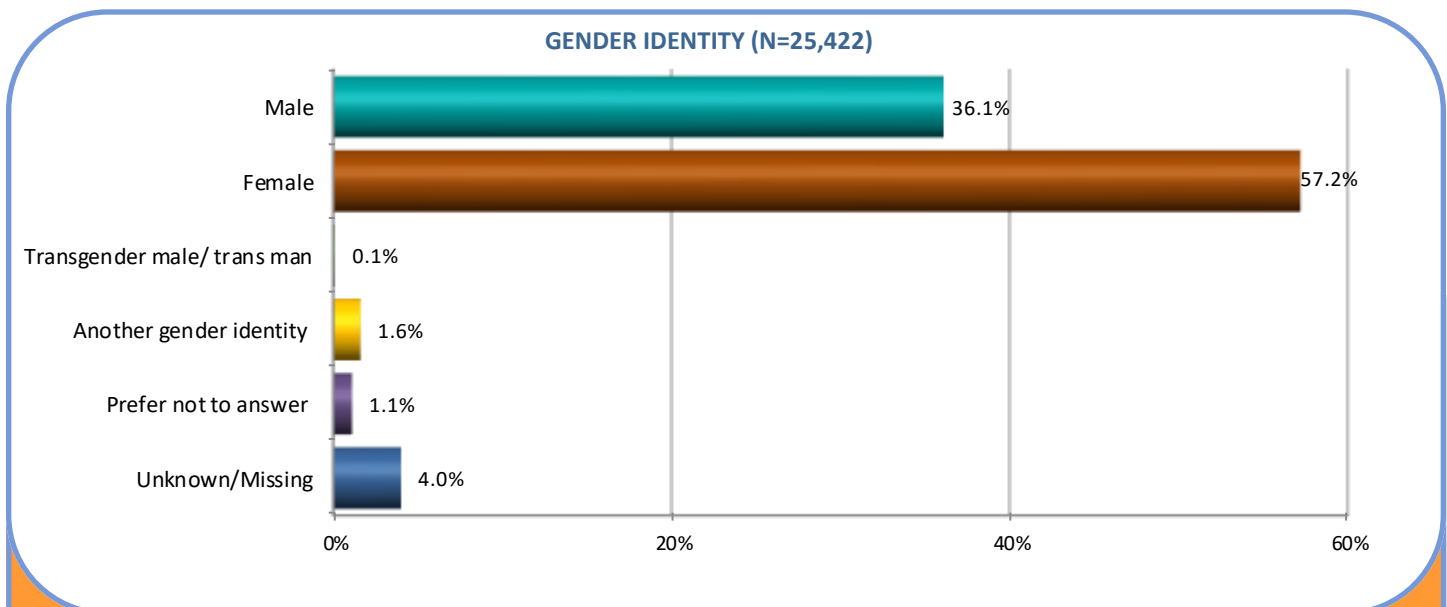
### PARTICIPANT LANGUAGE

PRIMARY LANGUAGE (N=11,930)*	N	%
Spanish	5,802	48.6
English	4,081	34.2
Arabic	506	4.2
Farsi	77	0.6
Tagalog	33	0.3
Vietnamese	28	0.2
Other	294	2.5
Prefer not to answer	195	1.6
Unknown/Missing	914	7.7

Forty-nine percent of the participants identified their primary language as Spanish. Thirty-four percent of participants identified their primary language as English.

\*Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=11,930 vs N=25,422).

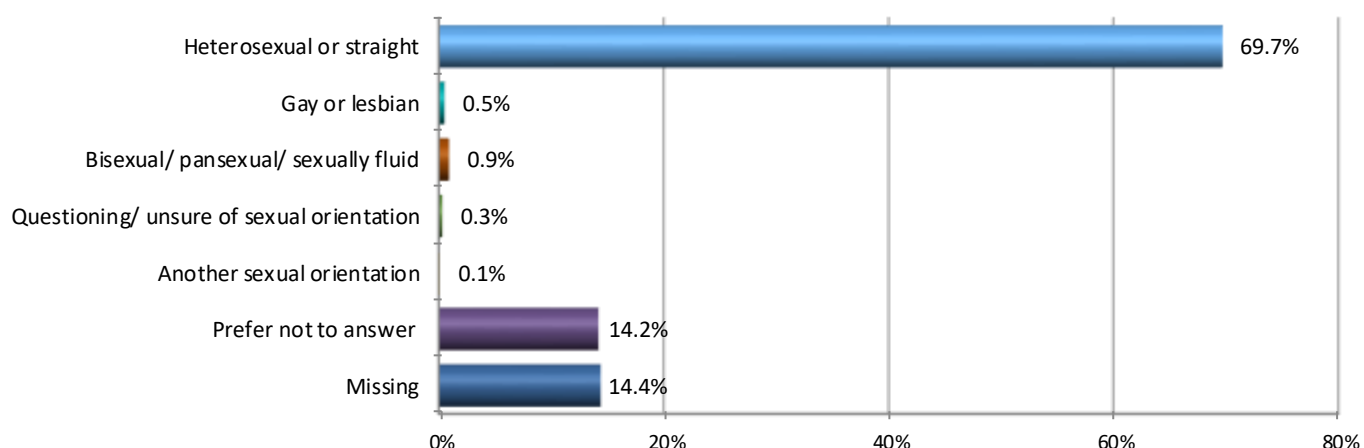
### GENDER IDENTITY



Fifty-seven percent of the participants identified as female. Nearly two percent of participants identified as "Another gender identity." One percent of participants preferred not to answer this question.

## PARTICIPANT SYSTEMWIDE DEMOGRAPHICS– CONTINUED

### SEXUAL ORIENTATION (N=11,930)\*

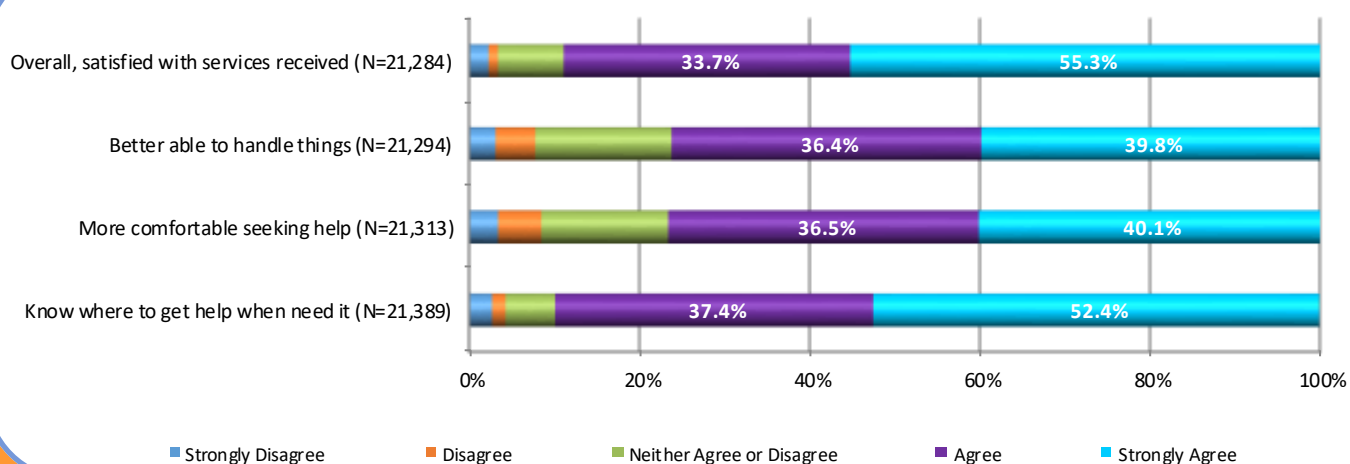


Almost seventy percent of the participants identified their sexual orientation as heterosexual/straight. Nearly one percent of participants identified their sexual orientation as bisexual/pansexual/sexually fluid. Nearly fourteen percent of participants preferred not to answer this question.

\*Not all programs are required to collect data for every indicator, which accounts for the lower denominator for this indicator (N=11,930 vs N=25,422).

## PARTICIPANT SYSTEMWIDE PROGRAM SATISFACTION

### PROGRAM SATISFACTION\*†



Eighty-nine percent of respondents agreed or strongly agreed that they were satisfied with the services they received. Nearly ninety percent of the participants agreed or strongly agreed that they knew where to get needed help as a result of the program. Seventy-six percent of participants agreed or strongly agreed that they were better able to handle things and solve problems as a result of the program. Seventy-seven percent of respondents agreed or strongly agreed that they were more comfortable seeking help as a result of the program.

\*Satisfaction data not available for all participants.

†Satisfaction data includes duplicate participants.

## CHILD AND ADOLESCENT PARTICIPANT SYSTEMWIDE REFERRAL TRACKING SUMMARY\*†

In FY 2017-18, County of San Diego Behavioral Health Services implemented a referral tracking procedure in order to collect data on referrals to mental health or substance use services and successful links to those services.

In FY 2019-20, a total of 302 participants received a mental health referral, and 96 of these participants successfully received a mental health service as a result of the referral (Linkage Rate = 31.8%).

Fewer than 5 participants successfully received a substance use service as a result of a substance use referral (Linkage Rate = 28.6%).

The average time between referral and linkage to services was twenty-one days.

*\*Referral tracking data not available for all programs.*

*†Linkage rates are underreported due to data entry error.*

**The Child and Adolescent Services Research Center (CASRC)** is a consortium of over 100 investigators and staff from multiple research organizations in San Diego County and Southern California, including: Rady Children's Hospital, University of California at San Diego, San Diego State University, University of San Diego and University of Southern California. The mission of CASRC is to improve publicly-funded mental health service delivery and quality of treatment for children and adolescents who have or are at high risk for the development of mental health problems or disorders.

